



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E287958**

| | | |
|--------------------------------------|---|---|
| INTERSTATE <input type="checkbox"/> | CITY STREET <input checked="" type="checkbox"/> | FIRE RESULTED <input type="checkbox"/> |
| STATE ROUTE <input type="checkbox"/> | OTHER <input type="checkbox"/> | STOLEN VEHICLE <input type="checkbox"/> |
| COUNTY RD <input type="checkbox"/> | PRIVATE WAY <input type="checkbox"/> | HIT & RUN INVOLVED <input type="checkbox"/> |

TRIBAL RESERVATION ☐

| | |
|---------------------|----------|
| CASE # | 13-02982 |
| LOCAL AGENCY CODING | |
| TOTAL # OF UNITS | 02 |
| OBJECT STRUCK | |

| | | | | | | | | | | | | | | | | |
|-------------------|----|---|----|---|------|-------------|------|----------|----|-------|--|---|---|----|----|------|
| DATE OF COLLISION | 11 | - | 26 | - | 2013 | TIME (2400) | 0718 | COUNTY # | 31 | MILES | | N | E | IN | OF | 0664 |
|-------------------|----|---|----|---|------|-------------|------|----------|----|-------|--|---|---|----|----|------|

ON (PRIMARY TRAFFIC WAY) INTERSECTION ☒ NON-INTERSECTION ☐

| | | |
|----------|-----------|------|
| GRADE RD | BLOCK NO. | 2600 |
|----------|-----------|------|

| | |
|------------|--------------------------------|
| DISTANCE | OF (REFERENCE OR CROSS STREET) |
| 26TH ST NE | |

| | | | | | | |
|---------|---|--------------------------------------|----------------------|---|-------|---------------|
| UNIT 01 | MOTOR VEHICLE <input checked="" type="checkbox"/> | PEDAL CYCLE <input type="checkbox"/> | DAMAGE THRESHOLD MET | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> | PHONE | D: 4255308519 |
|---------|---|--------------------------------------|----------------------|---|-------|---------------|

| | | | | | |
|-----------|---------|------------|--------|----------------|---|
| LAST NAME | SCHILLE | FIRST NAME | ALISSA | MIDDLE INITIAL | L |
|-----------|---------|------------|--------|----------------|---|

| | |
|--------------------|------------------|
| STREET NEW ADDRESS | 2708 122ND CT NE |
|--------------------|------------------|

| | | | | | |
|------|--------------|----|----|-----|-----------|
| CITY | LAKE STEVENS | ST | WA | ZIP | 982589121 |
|------|--------------|----|----|-----|-----------|

| | | | | |
|-----|--------------|---|--------------|--|
| CDL | RESTRICTIONS | B | ENDORSEMENTS | |
|-----|--------------|---|--------------|--|

| | | | | | | | | | | | |
|--------------------|--------------|-------|----|-----|---|--------|----|---|----|---|------|
| DRIVER'S LICENSE # | SCHILAL043BQ | STATE | WA | SEX | F | D.O.B. | 01 | - | 18 | - | 1996 |
|--------------------|--------------|-------|----|-----|---|--------|----|---|----|---|------|

| | | | | | | | | | | | |
|---------|--------|--------|---|--------|---|-------|---|------------|--------------|---|--------------------|
| ON DUTY | STATUS | AIRBAG | 2 | RESTR. | 4 | EJECT | 1 | HELMET USE | INJURY CLASS | 1 | NATURE OF INJURIES |
|---------|--------|--------|---|--------|---|-------|---|------------|--------------|---|--------------------|

| | | | | | |
|-----------------|--------|-------|----|------|-------------------|
| LICENSE PLATE # | 065XPX | STATE | WA | VIN# | 1G8ZH5289WZ159078 |
|-----------------|--------|-------|----|------|-------------------|

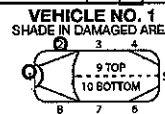
| | | | |
|-----------------|-------|-----------------|-------|
| TRAILER PLATE # | STATE | TRAILER PLATE # | STATE |
|-----------------|-------|-----------------|-------|

| | | | | | | | | | | | | |
|-----------|------|------|------|-------|-----|-------|----|---------------|---|----------|---------------|---|
| VEH. YEAR | 1998 | MAKE | SATU | MODEL | SL1 | STYLE | 4T | VEHICLE TOWED | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | TOWED BY | GOVT. VEHICLE | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
|-----------|------|------|------|-------|-----|-------|----|---------------|---|----------|---------------|---|

REGISTERED OWNER INFO. TRACY SCHILLE 2708 122ND CT NE LAKE STEVENS WA 98258 D: 4255308519

| | | | |
|-------------------------------|-------------------------------------|-------------------------|------------------|
| LIABILITY INSURANCE IN EFFECT | <input checked="" type="checkbox"/> | INSURANCE CO & POLICY # | PEMCO CA 8553271 |
|-------------------------------|-------------------------------------|-------------------------|------------------|

| | | | |
|--------------------------|--|------------|--------|
| VEHICLE LEGALLY STANDING | YES <input type="checkbox"/> NO <input type="checkbox"/> | CITATION # | CHARGE |
|--------------------------|--|------------|--------|



| | | | | | | | | |
|---------|---|--------------------------------------|-------------------------------------|---|----------------------|---|-------|---------------|
| UNIT 02 | MOTOR VEHICLE <input checked="" type="checkbox"/> | PEDAL CYCLE <input type="checkbox"/> | PEDESTRIAN <input type="checkbox"/> | PROPERTY OWNER <input type="checkbox"/> | DAMAGE THRESHOLD MET | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> | PHONE | D: 4253351508 |
|---------|---|--------------------------------------|-------------------------------------|---|----------------------|---|-------|---------------|

| | | | | | |
|-----------|-------|------------|-------|----------------|---|
| LAST NAME | ROEHL | FIRST NAME | VICKY | MIDDLE INITIAL | L |
|-----------|-------|------------|-------|----------------|---|

| | |
|--------------------|--------------------|
| STREET NEW ADDRESS | 10723 123RD AVE NE |
|--------------------|--------------------|

| | | | | | |
|------|--------------|----|----|-----|-----------|
| CITY | LAKE STEVENS | ST | WA | ZIP | 982588825 |
|------|--------------|----|----|-----|-----------|

| | | | | |
|-----|--------------|---|--------------|---|
| CDL | RESTRICTIONS | B | ENDORSEMENTS | P |
|-----|--------------|---|--------------|---|

| | | | | | | | | | | | |
|--------------------|--------------|-------|----|-----|---|--------|----|---|----|---|------|
| DRIVER'S LICENSE # | ROEHLVL414BH | STATE | WA | SEX | F | D.O.B. | 01 | - | 08 | - | 1959 |
|--------------------|--------------|-------|----|-----|---|--------|----|---|----|---|------|

| | | | | | | | | | | | |
|---------|--------|--------|---|--------|---|-------|---|------------|--------------|---|--------------------|
| ON DUTY | STATUS | AIRBAG | 2 | RESTR. | 4 | EJECT | 1 | HELMET USE | INJURY CLASS | 1 | NATURE OF INJURIES |
|---------|--------|--------|---|--------|---|-------|---|------------|--------------|---|--------------------|

| | | | | | |
|-----------------|--------|-------|----|------|-------------------|
| LICENSE PLATE # | 71689C | STATE | WA | VIN# | 4DRBUAFLX6B259348 |
|-----------------|--------|-------|----|------|-------------------|

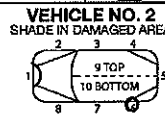
| | | | |
|-----------------|-------|-----------------|-------|
| TRAILER PLATE # | STATE | TRAILER PLATE # | STATE |
|-----------------|-------|-----------------|-------|

| | | | | | | | | | | | | |
|-----------|------|------|----|-------|---------|-------|--|---------------|---|----------|---------------|---|
| VEH. YEAR | 2006 | MAKE | IC | MODEL | SCH/BUS | STYLE | | VEHICLE TOWED | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | TOWED BY | GOVT. VEHICLE | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
|-----------|------|------|----|-------|---------|-------|--|---------------|---|----------|---------------|---|

REGISTERED OWNER INFO. LAKE SCHOOL NO 4 12309 22ND ST NE LAKE STEVENS WA 98258 D: 4253351508

| | | | |
|-------------------------------|-------------------------------------|-------------------------|---|
| LIABILITY INSURANCE IN EFFECT | <input checked="" type="checkbox"/> | INSURANCE CO & POLICY # | WA SCHOOLS RISK MANAGEMENT POOL LAKE STEVENS SCHHOL DIST #414 |
|-------------------------------|-------------------------------------|-------------------------|---|

| | | | |
|--------------------------|--|------------|--------|
| VEHICLE LEGALLY STANDING | YES <input type="checkbox"/> NO <input type="checkbox"/> | CITATION # | CHARGE |
|--------------------------|--|------------|--------|



| | | | | | |
|------------------------|------------|---------------|-----|--------|-----------|
| OFFICER'S NAME (PRINT) | D. PLANALP | BADGE OR ID # | 102 | AGENCY | WA0311900 |
|------------------------|------------|---------------|-----|--------|-----------|



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E287958**

CASE # **13-02982**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

| | | | | | | | | | | | | | | | | | | | |
|---------------------------------------|-------------------------------------|---|--------------------------|--------|---|-----------|----|--------|---|-------------|---|-------|---|------------|--|--------------|---|--------------------|--|
| NAME (LAST, FIRST, MIDDLE INITIAL) | | MAIRES COLTON J | | | | | | | | | | | | | | | | | |
| ADDRESS & PHONE # | | 12412 24TH PL NE #B LAKE STEVENS WA 98258 4253129314 | | | | | | | | | | | | | | | | | |
| SEX | | M | | D.O.B. | | MMDDYYYY | | 08 | | - 24 - 2000 | | | | | | | | | |
| PASSENGER | <input checked="" type="checkbox"/> | WITNESS | <input type="checkbox"/> | UNIT # | 2 | SEAT POS. | 10 | AIRBAG | 2 | RESTR. | 4 | EJECT | 1 | HELMET USE | | INJURY CLASS | 1 | NATURE OF INJURIES | |
| NAME (LAST, FIRST, MIDDLE INITIAL) | | NEATROUR ALEXIS D | | | | | | | | | | | | | | | | | |
| ADDRESS & PHONE # | | 2211 RUSSELL RD SNOHOMISH WA 98290 4257912558 | | | | | | | | | | | | | | | | | |
| SEX | | F | | D.O.B. | | MMDDYYYY | | 08 | | - 29 - 2000 | | | | | | | | | |
| PASSENGER | <input checked="" type="checkbox"/> | WITNESS | <input type="checkbox"/> | UNIT # | 2 | SEAT POS. | 10 | AIRBAG | 2 | RESTR. | 4 | EJECT | 1 | HELMET USE | | INJURY CLASS | 1 | NATURE OF INJURIES | |
| NAME (LAST, FIRST, MIDDLE INITIAL) | | LONDO CHRISTOPHER J | | | | | | | | | | | | | | | | | |
| ADDRESS & PHONE # | | 2110 130TH DR NE LAKE STEVENS WA 98258 4253080158 | | | | | | | | | | | | | | | | | |
| SEX | | M | | D.O.B. | | MMDDYYYY | | 01 | | - 10 - 2001 | | | | | | | | | |
| PASSENGER | <input checked="" type="checkbox"/> | WITNESS | <input type="checkbox"/> | UNIT # | 2 | SEAT POS. | 10 | AIRBAG | 2 | RESTR. | 4 | EJECT | 1 | HELMET USE | | INJURY CLASS | 1 | NATURE OF INJURIES | |

NARRATIVE

V-1 was at the intersection on 26th ST NE facing eastbound toward Grade RD, in the City of Lake Stevens. V-2 was driving northbound on Grade RD entering the intersection of Grade RD and 26th ST NE. V-2 had the right of way. V-1 pulled out onto Grade RD to turn left/northbound and collided into the rear driver side tire of V-2 with the front driver side of V-1. There was damage to both V-1 and V-2. V-2 had a driver and four student passengers on the bus. AID arrived onscene and checked the status of all parties involved. V-1 driver stated that she did not see the bus when she turned out onto Grade RD. V-1's windows were iced/fogged up when the collision occurred limiting her view out her driver and passenger windows. V-1 did not want to provide a written statement. V-2 did provide a written statement. WSP Commercial Vehicle Trooper came to the scene to inspect V-2.

**** AUTO-POPULATED SECTION ****

THE FOLLOWING ARE DESCRIPTIONS ENTERED FOR ITEMS SELECTED AS "OTHER":

Motor Vehicle Unit 1

Traffic Control: STOP SIGN

Motor Vehicle Unit 2

Seat Position (Passenger COLTON MAIRES): DRIVER SIDE OF SCHOOL BUS

Seat Position (Passenger ALEXIS NEATROUR): DRIVER SIDE OF SCHOOL BUS

Seat Position (Passenger CHRISTOPHER LONDO): PASSENGER SIDE OF SCHOOL

BUS

Seat Position (Passenger GREYSEN ROOK): PASSENGER SIDE OF SCHOOL BUS

**** END OF AUTO-POPULATED SECTION ****

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

D. PLANALP

11-26-13 08:39 AM

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

DATED

PLACE SIGNED

APPROVED BY

DATE

RON BROOKS 013

11/26/2013 10:06:22 AM

| | | | | | | | |
|---------------|-----|-------|-----------|------------------------|---------|---------------------|---------|
| BADGE OR ID # | 102 | ORI # | WA0311900 | TIME POLICE DISPATCHED | 7:18 AM | TIME POLICE ARRIVED | 7:22 AM |
|---------------|-----|-------|-----------|------------------------|---------|---------------------|---------|



SUPPLEMENTAL
POLICE TRAFFIC
COLLISION REPORT



013197

REPORT NO. **E287958**

CASE # **13-02982**

COMMERCIAL MOTOR CARRIER

INTERSTATE ☐ INTRASTATE ☐

UNIT # **2** USDOT **00** ICC # **0** VEHICLE TYPE **0** CARGO BODY TYPE **0**

CARRIER NAME **0**

CARRIER ADDRESS **0**

CITY **0** ST **0** ZIP **0**

NAME SOURCE **0** AXLES **00** GVWR **0** PLACARD **0** + **0** NAME IF NO NUMBER **0**

ADDITIONAL UNITS

UNIT # **0** MOTOR VEHICLE ☐ PEDAL CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET ☐ YES ☐ NO ☐ PHONE **0**

LAST NAME **0** FIRST NAME **0** MIDDLE INITIAL **0**

STREET NEW ADDRESS **0**

CITY **0** ST **0** ZIP **0**

CDL **0** RESTRICTIONS **0** ENDORSEMENTS **0**

DRIVER'S LICENSE # **0** STATE **0** SEX **0** D.O.B. **0** MMDDYYYY **0** - **0** - **0**

ON DUTY ☐ STATUS **0** AIRBAG **0** RESTR. **0** EJECT **0** HELMET USE **0** INJURY CLASS **0** NATURE OF INJURIES **0**

LICENSE PLATE # **0** STATE **0** VIN# **0**

TRAILER PLATE # **0** STATE **0** TRAILER PLATE # **0** STATE **0**

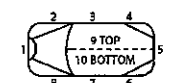
VEH. YEAR **0** MAKE **0** MODEL **0** STYLE **0** VEHICLE TOWED YES ☐ NO ☐ TOWED BY **0** GOVT. VEHICLE YES ☐ NO ☐

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT ☐ INSURANCE CO & POLICY # **0**

VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # **0** CHARGE **0**

SHADE IN DAMAGED AREA



UNIT # **0** MOTOR VEHICLE ☐ PEDAL CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET ☐ YES ☐ NO ☐ PHONE **0**

LAST NAME **0** FIRST NAME **0** MIDDLE INITIAL **0**

STREET NEW ADDRESS **0**

CITY **0** ST **0** ZIP **0**

CDL **0** RESTRICTIONS **0** ENDORSEMENTS **0**

DRIVER'S LICENSE # **0** STATE **0** SEX **0** D.O.B. **0** MMDDYYYY **0** - **0** - **0**

ON DUTY ☐ STATUS **0** AIRBAG **0** RESTR. **0** EJECT **0** HELMET USE **0** INJURY CLASS **0** NATURE OF INJURIES **0**

LICENSE PLATE # **0** STATE **0** VIN# **0**

TRAILER PLATE # **0** STATE **0** TRAILER PLATE # **0** STATE **0**

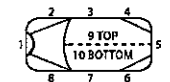
VEH. YEAR **0** MAKE **0** MODEL **0** STYLE **0** VEHICLE TOWED YES ☐ NO ☐ TOWED BY **0** GOVT. VEHICLE YES ☐ NO ☐

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT ☐ INSURANCE CO & POLICY # **0**

VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # **0** CHARGE **0**

SHADE IN DAMAGED AREA



I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

D. PLANALP

11-26-13 08:39 AM

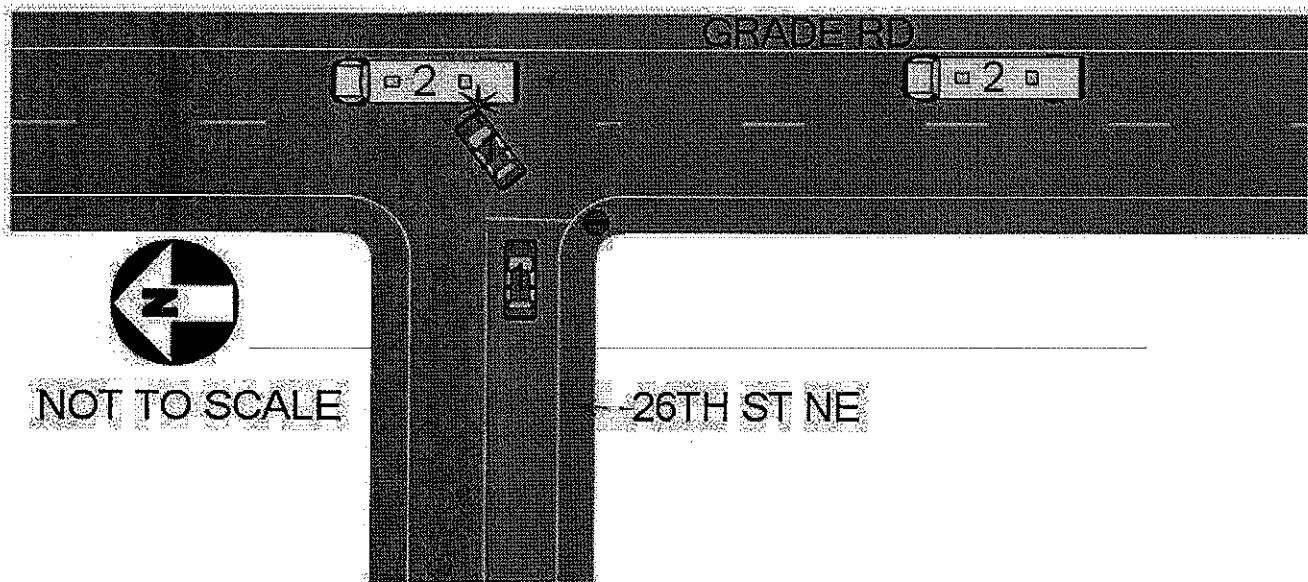
INVESTIGATING OFFICER'S SIGNATURE **0** UNIT OR DIST DET **0**

DATED: **0** PLACE SIGNED **0**

BADGE OR ID # **102** ORI # **WA0311900**

APPROVED BY **BROOKS** DATE **11/26/201**

PAGE **4** OF **5**



LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER 13-02982

VICTIM / WITNESS

| | | | | | | | | | | |
|--------------------------------------|---|---|-----|--|---------------|--------------|-------------|-------------|------------|--------------|
| NON-DISC <input type="checkbox"/> | NAME (LAST, FIRST MIDDLE) Roehl, Vicky, Lynn | RACE W | ETH | SEX F | DOB 1-8-59 | AGE 54 | HGT 5'1" | WGT 150 | HAIR LB | EYES Haze |
| STREET ADDRESS 10723-123rd Ave NE | | CITY Lake Stevens | | STATE WA | | ZIP 98258 | | RES. STATUS | | |
| HOME PHONE 425-334-4268 | | CELL PHONE 425-359-2617 | | PLACE OF EMPLOYMENT LK Stevens School Dist. | | | | | | |
| WORK PHONE 425-335-1568 | | EMAIL ADDRESS VLRoehlRei@comcast.net | | | | | | | | |

I, Vicky Roehl, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

Driving Bus North on Gracie Rd approached 26th black car coming East down 26th Didn't stop ran into side of Bus (Drivers side)

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

| | | |
|----------------------------------|-------------------------|--|
| SIGNATURE: <u>Vicky Roehl</u> | DATE SIGNED 11-27-13 | LOCATION SIGNED Gracie Rd & 26th Ave? |
| OFFICER/NUMBER: <u>#102</u> | DATE SIGNED 11-26-13 | LOCATION SIGNED LAKE STEVENS, WA |

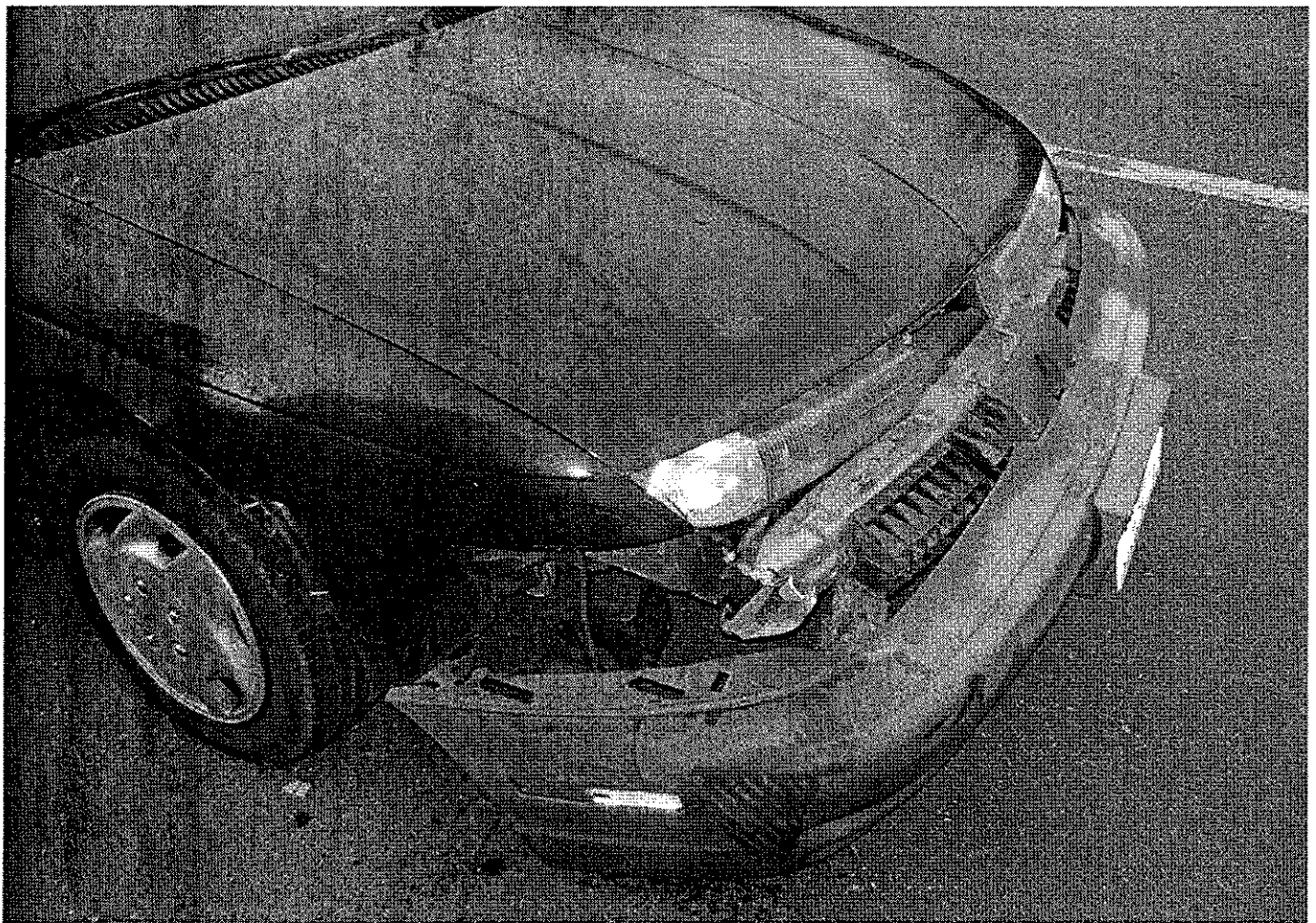
"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1
ORIGINAL

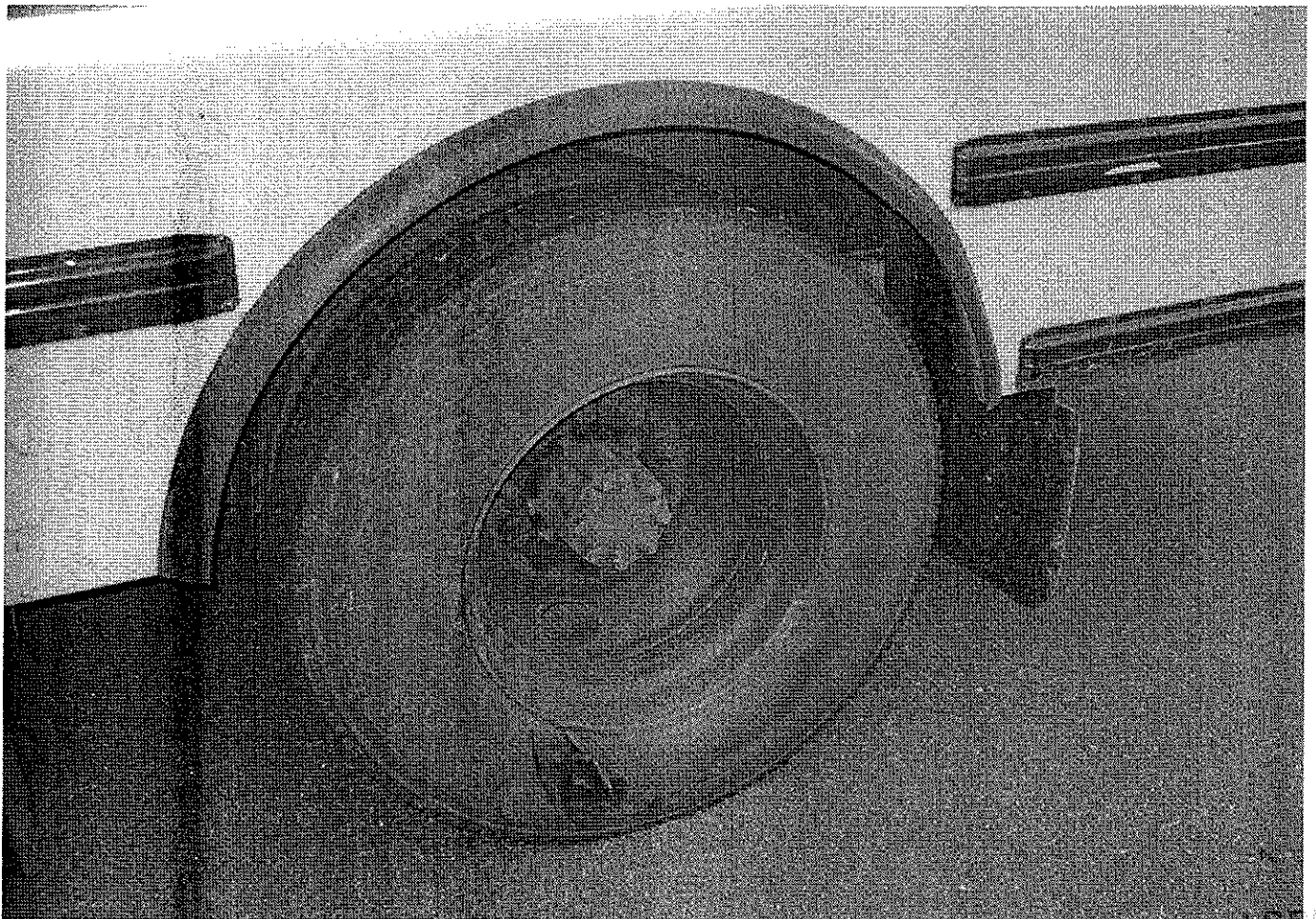


ORIGINAL

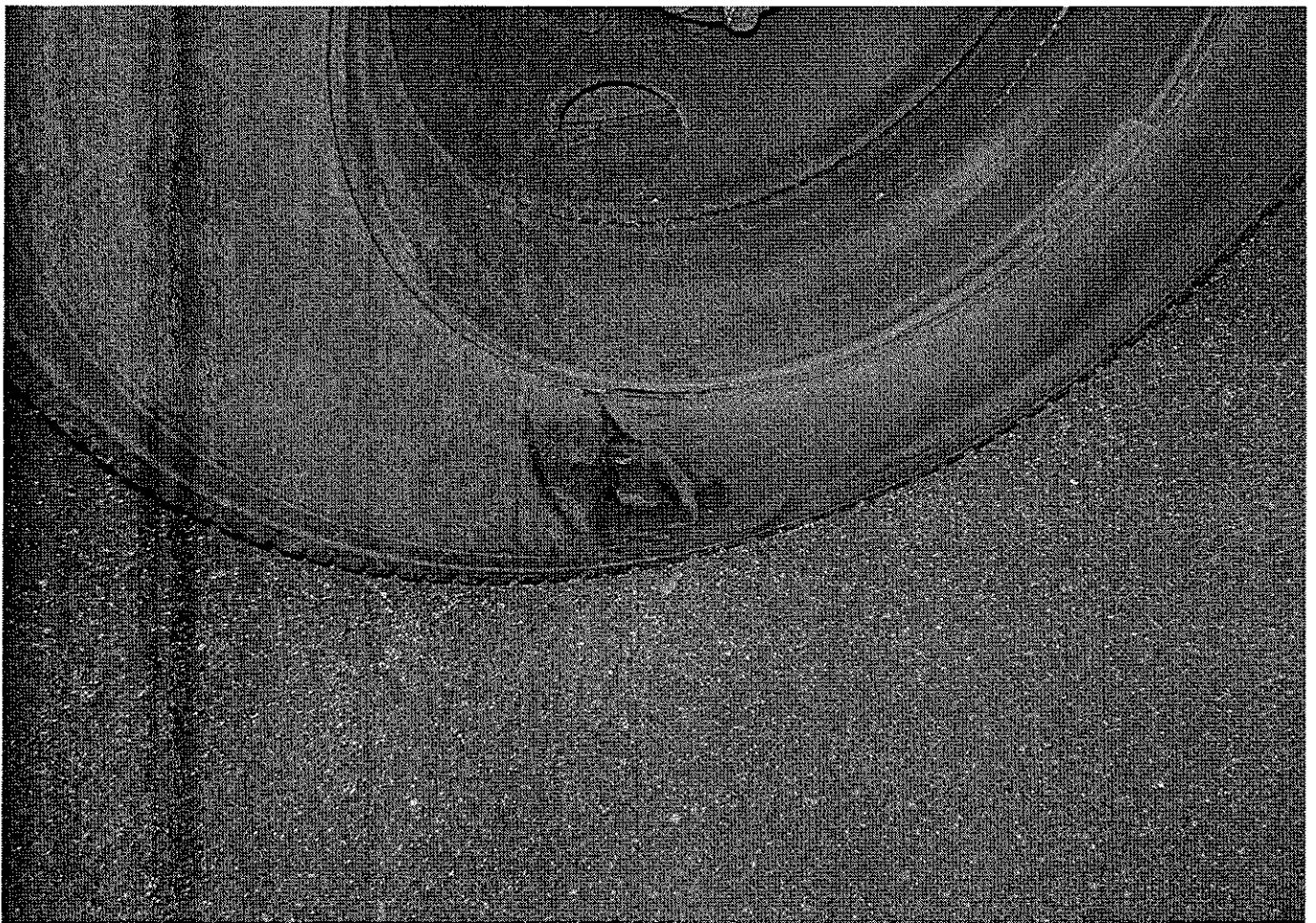




CSFO
09-02-01



LOD
CRINA



010360

| | | | | | |
|---|--|---|--|---------------------------------|--|
| LAKE STEVENS POLICE EVIDENCE UNIT | | Primary Officer/Badge Number D. PLANA P #102 | | Case Number 13-02982 | |
| Type of Crime: Felony / Misdemeanor (Circle) | | Type of Case: VEH ACCIDENT | | Date/Time: 11-26-13/0815 | |
| Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING | | *Evidence will be held until court disposition or when the Statute of Limitations has expired *Found and Safekeeping will be held for 60 days or 60 days past owner notification | | | |

| | | | | | | |
|--|-----------------------------|-------------|-----------------------|--|------------------|-------------------|
| Item # 1 | Item CD WITH PLCS | | Brand Name | | Storage Location | Disposition |
| | Brand/Model/Caliber | | (Further Description) | | | |
| | Serial # | Where Found | Weight of Narcotic | | | |
| Action # 3 | | | | | | |
| Owner's Name Address City State Zip Phone # | | | | | | Barcode goes here |
| Owner Signature/Other remarks /additional information/ special instructions | | | | | | |

| | | | | | | |
|--|---------------------|-------------|-----------------------|--|------------------|-------------------|
| Item # | Item | | Brand Name | | Storage Location | Disposition |
| | Brand/Model/Caliber | | (Further Description) | | | |
| | Serial # | Where Found | Weight of Narcotic | | | |
| Action # | | | | | | |
| Owner's Name Address City State Zip Phone # | | | | | | Barcode goes here |
| Owner Signature/Other remarks /additional information/ special instructions | | | | | | |

| | | | | | | |
|--|---------------------|-------------|-----------------------|--|------------------|-------------------|
| Item # | Item | | Brand Name | | Storage Location | Disposition |
| | Brand/Model/Caliber | | (Further Description) | | | |
| | Serial # | Where Found | Weight of Narcotic | | | |
| Action # | | | | | | |
| Owner's Name Address City State Zip Phone # | | | | | | Barcode goes here |
| Owner Signature/Other remarks /additional information/ special instructions | | | | | | |

| | | | | | | |
|--|---------------------|-------------|-----------------------|--|------------------|-------------------|
| Item # | Item | | Brand Name | | Storage Location | Disposition |
| | Brand/Model/Caliber | | (Further Description) | | | |
| | Serial # | Where Found | Weight of Narcotic | | | |
| Action # | | | | | | |
| Owner's Name Address City State Zip Phone # | | | | | | Barcode goes here |
| Owner Signature/Other remarks /additional information/ special instructions | | | | | | |

| | | | | | | |
|--|---------------------|-------------|-----------------------|--|------------------|-------------------|
| Item # | Item | | Brand Name | | Storage Location | Disposition |
| | Brand/Model/Caliber | | (Further Description) | | | |
| | Serial # | Where Found | Weight of Narcotic | | | |
| Action # | | | | | | |
| Owner's Name Address City State Zip Phone # | | | | | | Barcode goes here |
| Owner Signature/Other remarks /additional information/ special instructions | | | | | | |

| | | | | | | |
|----------------------------|--|--|--------------------|--|----------------------|--|
| Evidence Control Use Only: | | | | | | |
| Received by Evidence: | | NCIC/WACIC <input checked="" type="checkbox"/> Date: | CAD/RMS Checked | | ROUTING: | |
| Name: _____ # _____ | | NCIC/WACIC + Date: | Owner Letter Sent: | | White: Property Room | |
| Date: _____ Time: _____ | | NCIC/WACIC - Date: | Owner Letter Sent: | | Yellow: Case File | |

LSPD
ORIGINAL

Incident History for: #SS13025951 Xref: #AG13003363

Case Numbers: \$SS13002982

Entered 11/26/13 07:18:48 BY SPDF25 SP0357
Dispatched 11/26/13 07:18:59 BY SPDF17 SP0257
Enroute 11/26/13 07:18:59
Onscene 11/26/13 07:22:17
Closed 11/26/13 08:00:49

Initial Type: ACC Initial Alarm Level: Final Alarm Level:
Final Type: ACC (ACCIDENT, NON-INJURY OR UNKNOWN) Pri: 2 Dispo: H
Police BLK: SS001 Fire BLK: AG1620 Map Page: 377J-5 Group: SS1 Beat: NORT
Src: T
Loc: 26 ST NE/GRADE RD , LKS (V)

Loc Info: N/O ON GRADE

Name: PEGGY/LKS TRANSPORT

Addr:

Phone: 4253351508

/0718 (SP0357) ENTRY , SCHOOL BUS VS VEH, NO APPARENT INJ, REQ EVAL FO
R 4 STUDENTS ON BUS
/0718 CROSS #AG13003363
/0718 (SP0257) DISPER SS1910 #SS13 BROOKS, SGT (RON)
/0719 ASSTER SS1933 #SS102 PLANALP, OFFICER (DANIEL)
/0722 ONSCNE SS1933
/0724 (SS102) REMINQ SS1933 MDTVEH, 065XPX, , WA, , , , , , , , , ,
/0724 REMINQ SS1933 MDTVEH, 71689C, , WA, , , , , , , , , ,
/0729 (SS13) REMINQ SS1910 MDTVEH, 604ZQY, , WA, , , , , , , , , ,
/0730 REMINQ SS1910 MDTWANT, , , , , , , , , , , WA, 00789512, , , , , , , , , ,
/0735 (SP0257) ONSCNE SS1910
/0735 ASNCAS SS1933 \$SS13002982
/0736 MISC SS1910 , REQ WSP FOR COMMERCIAL VEHICLE
/0737 MISC SS1910 , PER WSP THEY WERE ADV BY SCHOOL AND HAVE UNIT E
NRT
/0755 (SS102) REMINQ SS1933 MDTWANT, SCHILLE, ALISSA, L, 011896, , , WA, , , , , , , , , ,
/0758 (SS13) *CLEAR SS1910 D/D
/0800 (SP0257) CLEAR SS1933 D/H
/0800 CLOSE SS1933

LSPD
ORIGINAL